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CENTRAL FAX CENTER****FEB 02 2006****Nixon & Vanderhye PC**  
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**(703) 816-4011****FACSIMILE COVER SHEET**  
**PLEASE DELIVER IMMEDIATELY!!!!**Atty Dkt.: 1579-637 Date: February 2, 2006  
To: Examiner Jiang, S. - Group: 1617  
Firm: USPTO  
Facsimile No.: (571) 273-8300  
From: Mary J. WilsonNumber of Pages (including cover sheet): 11  
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FACSIMILE OPERATOR**CERTIFICATION OF FACSIMILE TRANSMISSION**I hereby certify that this paper and any noted attachments are being facsimile transmitted to the Patent  
and Trademark Office on February 2, 2006.Mary J. Wilson  
Mary J. Wilson**ATTACHMENT/S: OFFICIAL AMENDMENT w/CREDIT CARD PAYMENT  
FORM****MESSAGE:**

In re PATENT APPLICATION OF:

NIKLASON et al  
Serial No.: 10/074,250  
Filed: February 14, 2002  
For: THERAPY FOR CEREBRAL VASOSPASM**CONFIDENTIALITY NOTE**The documents accompanying this facsimile transmission contain information belonging to Nixon & Vanderhye, which is confidential and/or legally  
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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Atty Dkt. 1579-637  
C# M#

NIKLASON et al

TC/A.U. 1617

Serial No. 10/074,250

Examiner: Jlang, S.

Filed: February 14, 2002

Date: February 2, 2006

Title: THERAPY FOR CEREBRAL VASOSPASM

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FEB 02 2006

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

**RESPONSE/AMENDMENT/LETTER**

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

☐ **Correspondence Address Indication Form Attached.**

Fees are attached as calculated below:

Total effective claims after amendment 0 minus highest number  
previously paid for 20 (at least 20) = 0 x \$50.00 \$0.00 (1202)/\$0.00 (2202) \$

Independent claims after amendment 0 minus highest number  
previously paid for 3 (at least 3) = 0 x \$200.00 \$0.00 (1201)/\$0.00 (2201) \$

If proper multiple dependent claims now added for first time, (ignore improper); add  
\$360.00 (1203)/\$180.00 (2203) \$

Petition is hereby made to extend the current due date so as to cover the filing date of this  
paper and attachment(s)

One Month Extension \$120.00 (1251)/\$60.00 (2251)  
Two Month Extensions \$450.00 (1252)/\$225.00 (2252)  
Three Month Extensions \$1020.00 (1253)/\$510.00 (2253)  
Four Month Extensions \$1590.00 (1254)/\$795.00 (2254)  
Five Month Extensions \$2160.00 (1255)/\$1080.00 (2255) \$ 225.00  
\$130.00 (1814)/\$65.00 (2814) \$

Terminal disclaimer enclosed, add

☒ Applicant claims "small entity" status. ☐ Statement filed herewith

Rule 56 Information Disclosure Statement Filing Fee

\$180.00 (1806) \$

Assignment Recording Fee

\$40.00 (8021) \$

Other:

\$

**TOTAL FEE (CREDIT CARD PAYMENT FORM ATTACHED) \$ 225.00**

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A duplicate copy of this sheet is attached.

901 North Glebe Road, 11th Floor  
Arlington, Virginia 22203-1808  
Telephone: (703) 816-4000  
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MJW:tat

NIXON & VANDERHYE P.C.  
By Atty: Mary J. Wilson, Reg. No. 32,955

Signature: Mary J. Wilson

02/03/2006 MBINAS 00000039 10074250

01 FC:2252

225.00 OP

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By Atty: Mary J. Wilson, Reg. No. 32,955Signature: Mary J. Wilson

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Atty. Ref.: 1579-637; Confirmation No. 1617

Appl. No. 10/074,250

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Examiner: Jiang, S.

For: THERAPY FOR CEREBRAL VASOSPASM

\* \* \* \* \*

February 2, 2006

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P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

**AMENDMENT**

This is in response to the Office Action dated September 2, 2005, in the above matter, the period for response having been extended up to February 2, 2006, by submission of the required petition and fee herewith. The following comments are offered.